

PTO/SB/22 (09-06)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) 2870-0177P **FY 2006** (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) 10/046,141-Conf. #3642 Filed January 16, 2002 **Application Number** PHOTOTHERMOGRAPHIC MATERIAL Art Unit 1752 Examiner T. Chea This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee One month (37 CFR 1.17(a)(1)) \$120 \$60 Two months (37 CFR 1.17(a)(2)) \$450 \$225 450.00 Three months (37 CFR 1.17(a)(3)) \$510 \$1020 Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$1080 Five months (37 CFR 1.17(a)(5)) \$2160 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 October 2, 2006 Signature Date (703) 205-8000 Marc S. Weiner Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more

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forms are submitted.

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than one signature is required, see below.



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PTO/SB/17 (07-06)

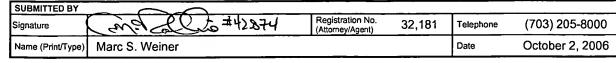
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on Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/046,141-Conf. #3642 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL January 16, 2002 Filing Date Tetsuo YAMAGUCHI First Named Inventor For FY 2005 **Examiner Name** T. Chea 1752 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2870-0177P **TOTAL AMOUNT OF PAYMENT** 450.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order Other (please identify): x Check Credit Card None Birch, Stewart, Kolasch & Birch, LLP Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES **Small Entity Small Entity Small Entity** Fees Paid (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 Utility 300 150 500 250 100 100 100 130 65 Design 200 50 80 Plant 200 100 300 150 160 300 300 150 500 250 600 Reissue 0 0 Provisional 200 100 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) 200 100 360 180 Multiple dependent claims **Multiple Dependent Claims** Fee Paid (\$) **Total Claims** Extra Claims Fee (\$) - 20 = 0 x = 50.00 =0.00 Fee Paid (\$) Fee (\$)

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50						
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets	Extra Sheets	Number of	each additional 50 or fraction thereof	Fee (\$)		Fee Paid (\$)
100 =	:	/50	(round up to a whole number) x		= _	
4. OTHER FEE(S)						Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge): 1252 Extension for response within second month						450.00

Fee Paid (\$)

0.00





HP = highest number of total claims paid for, if greater than 20.

**Extra Claims** 

1 - 3 = 0 x 200.00 =

HP = highest number of independent claims paid for, if greater than 3.

Fee (\$) × 200.00

Indep. Claims

3. APPLICATION SIZE FEE